TOWN OF PLYMOUTH

Request for Plumbing or Gas Inspection

PLEASE FILL IN FORM COMPLETELY & FAX TO (508-830-4028), MAIL OR HAND DELIVER TO INSPECTOR OF PLUMBING & GAS: 11 LINCOLN ST. PLYMOUTH, MA 02360. ANY QUESTIONS, PLEASE CALL THE INSPECTOR DURING OFFICE HOURS DAILY FROM: 7:30 – 9:30 AM. @ (508) 747-1620 x 114.

******SOMEONE MUST BE AT THE LOCATION FOR AN INSPECTION. *****
*****

APPLICATION NO. _____
REQUIRED FOR PROCESSING INSPECTION

PLUMBING PERMIT #:_____

GAS PERMIT #:_____

Today's Date: _____

Permit number REQUIRED for processing Inspection.

I, _____ hereby request an inspection under Massachusetts General Law Chapter 142

The installation is complete and ready for inspection at: _____
(Property Address)

Day Requested: Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐

MANOMET AREA & PINE HILLS -- MONDAY, WEDNESDAY & FRIDAY -- 10 a.m. to 1 p.m.
EXIT 2, PONDS, WAREHAM & BUTTERMILK BAY AREAS -- TUESDAY & THURSDAY -- 10 a.m. to 1 p.m.
NORTH & WEST PLYMOUTH -- MONDAY THRU FRIDAY -- 1 p.m. to 3:30 p.m.

NOTE: INSPECTION DAYS & TIMES MAY BE SUBJECT TO CHANGE

TYPE OF INSPECTION REQUESTED

☐ Rough Inspection for: _____ ☐ Re-Inspection

☐ Final Inspection for: _____

CELL PHONE NO. _____

License Number: _____ Licensee's Signature: _____

Comments: _____

_____

This section to be completed by Plymouth Inspector of Plumbing & Gas

Inspection Date: _____ ☐ Approved ☐ Disapproved ☐ No Access.

_____

_____

_____

Inspector: _____

Rev. 6/20/14